



TEXAS
Health and Human
Services

Local Health Department (LHD)

Random Moment Time Study

The Agenda



Random Moment Time Study (RMTS) will include:

- RMTS Overview
- RMTS Requirements
- Contacts – Roles and Responsibilities
- Participant List
- Moment Selection
- Moment Response
- System Demonstration
- Polling Questions
- Medicaid Administrative Claiming (MAC) Overview
- Wrap up

What is Random Moment Time Study (RMTS)?

- A valid random sampling technique that measures the participant's time performing work activities
- The “Moment” represents one minute of time that is randomly selected from all available moments within the quarter
- Statewide time study sample

Regardless of the entity the time study participant is located, once the moment has occurred, please logon to STAIRS and respond to the series of questions documenting the activity being performed and the name of the entity.
- Significantly reduces staff time needed to record participant activities



Overview - Purpose of RMTS

- To determine the percentage of time the LHD incurs assisting individuals to access medically necessary Medicaid funded services

Medicaid Outreach

Medicaid Eligibility Determination

Medicaid Referral, Coordination, and Monitoring

Medicaid Staff Training

Medicaid Transportation

Medicaid Translation

Medicaid Program Planning, Development & Interagency Coordination

Medicaid Provider Relations

- To reasonably identify staff time spent on activities during the given quarter.



Overview - Time Study Activities

- **Direct Medical** – Providing care, treatment and/or counseling
- **Outreach** – Informing individuals, families and groups about available services
- **Eligibility** – Assisting individuals or families with the Medicaid eligibility process
- **Referral, Coordination, and Monitoring** – Making referrals, coordinating and/or monitoring the delivery of medical services
- **Staff Training** – Coordinating, conducting or participating in training pertaining to medical or Medicaid services
- **Transportation** – Arranging or providing transportation to medical or Medicaid services
- **Translation** – Arranging or providing translation to an individual or family to access medical or Medicaid services
- **Program Planning, Development & Interagency Coordination** – Developing strategies to improve the coordination and delivery of medical or Medicaid services
- **Provider Relations** – Activities to secure and maintain Medicaid providers



Overview- RMITS Process

HHSC contractor codes moment



RMITS Contact identifies pool of time study participants



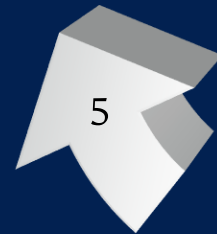
HHSC Contractor identifies pool of available time study moments



HHSC Contractor randomly matches moments and participants



RMITS Contact ensures selected participants are trained



Participant responds to selected moment by answering moment online



HHSC contractor codes moment



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Requirements for RMTS

In order to participate, you must...

- Time Study Periods (Federal Fiscal Quarters)
 - 1st Quarter - October, November, December
 - 2nd Quarter - January, February, March
 - 3rd Quarter - April, May, June
 - 4th Quarter – July, August, September
- To claim MAC must participate in time study.
- Participant List (PL) must be certified for entity to participate in the random moment time study (RMTS).
- To be included on the MAC claim the position must be included on the PL.
- A statewide response rate of 85% for RMTS moments is required.
- Mandatory annual training for RMTS Contact and participants is required.



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Requirements - Important Dates

Event	Opens/Begins	Closes/Ends (6 p.m. CT)
-------	--------------	----------------------------

Participant List (PL)

1st Quarter PL	08/15/2019	09/13/2019
2nd Quarter PL	09/14/2019	12/13/2019
3rd Quarter PL	12/14/2019	03/13/2020
4th Quarter PL	03/14/2020	06/15/2020

Time Study (TS)

1st Quarter TS	10/01/2019	12/31/2019
2nd Quarter TS	01/02/2020	03/31/2020
3rd Quarter TS	04/01/2020	06/30/2020
4th Quarter TS	07/01/2020	09/30/2020



Requirements - Training

- Each RMTS Contact must complete HHSC training annually
- RMTS contacts are required to complete only one HHS annual initial training and then are eligible to take “refresher” trainings.
- Initial training must be interactive and therefore must be conducted via Face-to-Face, Webinar, Skype or Teleconference
- Refresher training may be conducted via CD's, videos, web-based and self-paced training
- HHSC recommends that all participating LHD's have at least 2 employees attend mandatory RMTS Contact training
- Trained RMTS contacts are responsible for training Time Study (TS) participants annually
- MAC Financial Contact training is mandatory and held separately



Requirements - Training

Full Access versus View Only Access

System Access is limited to “View Only” until training is completed



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Welcome, Fred Erny (Logout)

Edgar County Public Health Department

Dashboard Participant List Time Study Sample Manage

Manage Contacts Manage Training Status

FY2015 -- Edgar County Public Health Department
RMTS Contact Trainings

Filters: FY2015 Edgar County Public Health Department RMTS Contact Trainings All Users Confirm

Preparers Available for Hire

Actions	FB User Id	First Name	Last Name	District	Trained	Status	Training	Training Period	Willing to Hire Out? *
Make View-only	273387			Edgar County Public Health Department (Secondary RMTS Contact, Primary MAC Financial Contact, Secondary Director)	Yes	Full Access to PL and TS	RMTS 2015 - LHD Refresher (Webinar 2014-08-20, 08:30:00-11:00:00 Austin, TX)	FY2015	No
No Access	696837			Edgar County Public Health Department (Secondary MAC Financial Contact)	Yes	No Access to PL and TS	RMTS 2015 - LHD Refresher (Webinar 2014-08-06, 13:00:00-15:30:00 Austin, TX)	FY2015	No
Make View-only	273405			Edgar County Public Health Department (Secondary RMTS Contact)	Yes	Full Access to PL and TS	RMTS 2015 - LHD Refresher (Webinar 2014-11-19, 13:00:00-15:30:00 Austin, TX)	FY2015	No
Yourself	421941			Edgar County Public Health Department (Primary RMTS Contact)	Yes	Full Access to PL and TS	RMTS 2015 - LHD Refresher (Webinar 2014-08-06, 13:00:00-15:30:00 Austin, TX)	FY2015	No Change to Yes
Not Trained	777122			Edgar County Public Health Department (Secondary MAC Financial Contact)	No	No Access to PL and TS			
Not Trained	440299			Edgar County Public Health Department (Secondary RMTS Contact)	No	No Access to PL and TS			
Not Trained	271125			Edgar County Public Health Department (Primary Director)	No	No Access to PL and TS			

* Choosing "Yes" means that you authorize the release of your name and contact information to the general public as someone who is willing to be hired to provide contract services to others.
NOTE: You must have attended training for the relevant period and role type in order to select "Yes". Neither HHSC nor Fairbanks will endorse an individual's capabilities to provide the contract service.

RMTS Information
[RMTS Information Website \(TX - HHSC\)](#)

MAC Information
[MAC Information Website \(TX - HHSC\)](#)

For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanksllc.com

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STAIRS Contacts

- ❑ Entity Contacts
 - Director
 - RMTS Contacts
 - MAC Financial Contacts
- ❑ Time Study Participants
- ❑ Health and Human Services Commission
- ❑ HHSC Contractor
 - Fairbanks LLC
 - ❑ Technical Support
 - ❑ Central Coding Staff



Director

- Must be designated as a contact in STAIRS. Username and password will be provided via E-mail
- Has the ability to add “Primary” RMTS contact

Primary RMTS Contact can add Secondary Contacts

When a Primary or Secondary RMTS contact is added, it automatically generates an e-mail containing their username and password



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RMTS Contact

- Must be an employee of LHD or its designee

Primary RMTS Contact must be an employee of LHD

LHD assumes all responsibility for designee's actions/non-actions

- Ensure all contact information is current and accurate
- Must attend annual training provided by HHSC
- Verify and update quarterly Participant List
- Provides RMTS training to sampled participants
- Provides ongoing technical assistance to participants
- Ensure LHD compliance with 85% required response rate

Receives weekly list of participants that did not respond to their moments (document reason for missed moments)

- Contact can enter paid and unpaid time off for the selected participants when they are unavailable



RMTS Contact (con't)

- Time study participants who are absent at the time of their selected moment but will return within 5 business days, should complete the moment.
- The RMTS Contact will need to respond to the moment as “paid or unpaid” leave if the participant will not return within 5 business days.
- If a position is Vacant, the RMTS Contact should respond to the moment as “unpaid” leave. If a position has been filled, the selected moment should be forwarded to the new employee for response.
- If the position is filled after the 3 day notification has been e-mailed to the vacant position or the employee previously in that position, the new employee will have to use the username and password provided on the 3 day notification
- Because this is a STATEWIDE time study sample if you have an employee (contractor or regular) that has been selected for a moment but is working for another LHD at the time of their moment they still respond to the moment what they were doing



Manage Time Study Sample

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Welcome, (Logout)

Time Study Sample (ECI)

Dashboard Participant List Time Study Sample Manage

Open Quarter: July - September 2018

Quarter-to-Date Compliance: 85%
Overall Compliance: 17%

Open Quarter: July - September 2018 Change Quarter (Training status: full access)

Download Sampled Usernames/Passwords to Distribute Reference Materials

Paid Leave Unpaid Leave Edit

Showing: 1 - 69

Job Category	Last Name	First Name	Email	Location	Employment Type	Moment ↑	Is Certified
Early Intervention Specialist (EIS)		Joanne		Allen	Part Time	07/03/2018, 05:51 AM	Certified 06/28/2018, 09:46 AM
Speech Language Pathologist - Intern (CFY)		Whitney	@.org			110	Full Time 07/19/2018, 11:49 AM Not Certified
Early Intervention Specialist (EIS)		Cassandra	@.org			131	Full Time 07/02/2018, 10:09 AM Certified 07/02/2018, 11:16 AM CDT
Marriage & Family Therapist (LMFT)		Sarah	@.org			150	Full Time 07/02/2018, 11:08 AM Certified 07/02/2018, 07:28 AM CDT
Occupational Therapist - Licensed (OT)		Megen	@.org			162	Full Time 07/20/2018, 01:26 PM Certified 07/20/2018, 11:16 AM CDT
Early Intervention Specialist (EIS)		Lisa	@.org			115	Full Time 07/20/2018, 02:58 PM Future Moment
Early Intervention Specialist (EIS)			@.org				Full Time 07/27/2018, 11:42 AM Future Moment

For questions, please contact Fairbanks LLC Client Information



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Time Study Participant

Time Study Participant must:

- Must answer the following to document the sampled moment:
 - Who was with you?
 - Why were you performing the activity?
 - What were you doing?
- Must attend annual training provided by trained RMTS Contact
- Participant notified of moment 3 days in advance
- Enter response within 5 business days of moment
- Reminders sent to participants via e-mail at 24, 48, & 72 hrs.
 - Primary RMTS Contact copied on the 72 hour reminder
- Failure to enter the information will disqualify the moment
- Respond to follow-up questions from coders within 3 business days from receipt of e-mail.
 - Primary RMTS Contact will be copied on the e-mail



HHSC – Time Study Unit

- Provides RMTS support and guidance
- Provides training to RMTS Contacts
- Provides training to Central Coders
- Works with appropriate federal agencies to design and implement programs
- Conducts ongoing program review to include:
 - Time Study results
 - Compliance with training requirements
 - Documentation compliance
- Sends out the non-compliance notification letters



Fairbanks, LLC.

Central Coders

- Receives training from HHSC on activity codes
- Review the participant's response for the sampled moment
- Assigns activity code using uniform time study codes
- When additional information is needed they must obtain clarifying information from time study participants via follow-up e-mail within 3 business days of request.
- Moments and assigned codes are reviewed by a 2nd and 3rd coder for agreement and quality assurance



Fairbanks, LLC. (con't)

Technical Support

- Contracted by HHSC to operate and administer the web-based RMTS system
- Assist in annual training for RMTS Contacts
- Ongoing system support
- Send e-mail notification to selected participant 3 days prior to the sampled moment
- Send reminder e-mails for non-response to the sampled moment



Polling Question

1. If a participant fails to respond to their moment within the 5 business days the RMTS Contact must:
 - A. Document the reason for the missed moment in STAIRS
 - B. Report the incident to the participant's supervisor
 - C. Remove the participant from the PL and exclude from TS
 - D. All of the above



Participant List

Agenda

- Development
- Certification
- Who's In
- Drop Down Options
- System Demonstration



PL - Development

- At the beginning of each quarter only the trained RMTS Contact provides in STAIRS a comprehensive list of staff eligible to participate in the RMTS.
- Once PL is closed you cannot add/delete a participant nor change position/function category.
- Every time the PL is updated, it is also certified.

The RMTS Contact must open the PL and click the “certify the PL” button prior to the deadline, even if there are no changes to the participant list from the previous quarter.



PL - Development

- An accurate PL is a critical part for ensuring eligibility for MAC

If an LHD does not update/certify its PL by the deadline:

They are ineligible to submit a MAC claim for that quarter

- Reminder e-mails will be sent only to those LHDs that have not certified their PL.
- The PL provides a basis to identify the positions that may be included in the MAC claim



PL - Development

Vacant Positions

Inconsistent implementation from year to year and entity to entity

- Only the vacant position(s) the LHD anticipates filling during the quarter should be included on the PL
- Should be reviewed and edited each quarter before the PL closes
- Loading the PL with vacant positions limits the opportunity for the selected moment to be a reimbursable response
- RMTS Contact responds to the moment as paid/unpaid leave
- Excess ultimately lowers the RMTS percentage across the State



PL - Development

Duplicate Positions - What To Do???

- Identify and Remove from PL
- If more than one job function is performed by the participant, only include it once on the PL in the category/function performed majority of the time.
- Email(s) will be sent to those entities identified as having possible duplicate entries.
- HHSC trained RMTS Contact will be responsible for removing duplicate entries prior to the PL close date.

To remove duplicates from the PL do the following:

Export your PL to Excel. Choose the column of data (e.g. address, external ID) that may have duplicates. Highlight that column and choose the “conditional formatting” option. You’ll see an option there to “highlight duplicate values”

It’s easy to identify and remove any duplicates.



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PL - Who's In???

Participant List includes:

- Staff who perform MAC activities:
 - Regular duties on a weekly basis
 - Regular Staff
 - Federally funded employees
- Contractors (including all positions) who are not employees of the LHD but provide services for entity.
 - For one position being filled by multiple contractors, it should be listed as one position on PL
 - For multiple positions filled by one or more contractors, then each position should be listed on PL.
- Vacant positions that are anticipated to be filled (with reasonably certainty) during the quarter.



PL - Drop Down Options

Administrative Assistant/Technician

Aide – Health Clinic

Audiologist

Clerk - Intake/Screening/Eligibility

Coordinator – Immunization/HIV/STD/TB

Dental Assistant

Dental Hygienist

Dentist (DO)

Dietitian

Health Education - (Specialist/Technician)

Interpreter/Translator/Bilingual Specialist

Licensed Chemical Dependency Counselor (LCDC)

Licensed Marriage and Family Therapist (LMFT)

Licensed Professional Counselor (LPC)

Medical Assistant

Nurse -Advanced Practitioner (APN)

Nurse - Licensed Vocational (LVN)

Occupational Therapist - Licensed (OT)

Occupational Therapist - Certified Assistant (COTA)

Outreach Worker/Case Worker/Community Relations Specialist

Physical Therapist - Licensed (PT)

Physical Therapist - Licensed Assistant (LPTA)

Physician - Medical Doctor (MD)

Physician Assistant (PA)

Psychiatrist – Licensed

Psychologist - Licensed

Psychology – Licensed Intern

Receptionist/Telephone Operator

Registered Nurse (RN)

Service Coordinator/Case Manager

Social Worker - Licensed Baccalaureate (LBSW)

Social Worker - Licensed Clinical Social Worker (LCSW)

Social Worker – Licensed Master (LMSW) – (Non-clinical)

Specialist - Pregnancy, Education and Parenting Program

Specialist - Prevention (Immunization/HIV/STD/TB)

Speech Language Pathologist - Licensed (SLP)

Technical – Medical Records/Quality Assurance

Technician – Laboratory/Radiology



PL - System Demonstration

Demonstration of RMTS online system:

- Participant List Development
- Managing Contacts
- Designating “Willing to Hire Out”
- Training Tracking
- Time Study Sample
- Monitoring Response Completion
- Documenting non-response



Polling Questions

2. If a participant performs more than one job function for your LHD place them on the PL for each function they perform

- A. True
- B. False

3. Mr. Lopez has resigned and Ms. Cortez has replaced him and both are SLP should the RMTS Contact update the PL with Ms. Cortez?

- A. True
- B. False



Polling Question

4. Which of the following **IS NOT** a requirement for Random Moment Time Study participation?

- A. Certify the Participant List (PL) for each quarter
- B. Have an “active” Texas Provider Identifier (TPI)
- C. To meet the mandatory training requirements quarterly
- D. Maintain the 85% response rate for selected moments



Time Study Moment - General

Total pool of moments calculation:

(work days in quarter) x (work hours each day) x (60) x (# of participants)

Time study “moments” are randomly selected throughout the entire quarter

A time study “moment” represents one minute at the selected time

If a participant is sampled for a “moment,” their only responsibility is to document what they were doing at that precise minute

Some options have “hover-over” and/or “question marks”  that provide additional information that helps the participant make the best selection



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Polling Questions

5. If no RMTS contact has completed training for the current FFY & the PL closes in just 5 days. The RMTS contact should:

- A. Open the spreadsheet “Preparers Available for Hire”
- B. Call Time Study Unit to request an individual training
- C. Call Fairbanks to request access to STAIRS on-line system
- D. Inform CEO/Director they cannot participate in MAC

6. If a selected participant is no longer working at the LHD and no one has filled the position, the RMTS Contact should:

- A. Respond to the moment as paid leave
- B. Respond to the moment as unpaid leave
- C. Edit the moment & change the participant name to “Vacant”
- D. Both B & C



Polling Questions

7. A RMTS Contact with "View Only" access can respond to a moment when the participant can't complete the moment in the 5 days

- A. True
- B. False



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RMTS Participant Moment

Demonstration of RMTS online system:

- Sampling and Notification
- Participant Questions
- System Demonstration
- Moment Completion



Moment – Notification Example

E-mail sent to selected participants

Name: [REDACTED]
Entity: [REDACTED]
Entity Contact: [REDACTED]
RMTS Category: [REDACTED]
Random Moment: 09:29 AM on 07/25/2018

You have been selected to participate in the Random Moment Time Study (RMTS) which is a brief online survey on behalf of your entity. Your participation is mandatory and assists your entity in obtaining reimbursement for Medicaid Administrative Claiming (MAC).

In order to complete the Random Moment Time Study, you will need to go to www.fairbanksllc.com and select CLIENT LOGIN (in upper right hand corner). You will then need to login with the information below and answer the questions asked to report the activity you were performing at your sampled moment of 09:29 AM on 07/25/2018.

User Name: [REDACTED]
Password: [REDACTED]

If you need any assistance or have any questions, please contact your RMTS Contact listed above or the Fairbanks support line at (888) 321-1225 or at info@fairbanksllc.com.



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Moment – Web Page Screen

www.fairbanksllc.com



The screenshot shows the Fairbanks LLC website. The header includes the "FB FAIRBANKS LLC" logo and navigation links: "About Us", "Services", "Clients", "News", "Careers", and "Contact Us". A "Client Login" button is also present. The main banner features a hand-drawn flowchart on a whiteboard, with a hand holding a marker. The text "Define the" and "Develop the s" is visible. A dropdown menu is open, listing various states and services: Alabama, California, Illinois, Kentucky, Missouri, Nebraska, New Mexico, North Carolina, Texas Cost Reporting, Texas ECI, Texas ISD, Texas LHD (highlighted with a red arrow), and Texas MH-IDD. Below the banner, there are three columns of text: "Uncompromised quality and client service." followed by a paragraph about Fairbanks' expertise; "What We Do" followed by a paragraph about partnerships with government agencies; and "Who We Work With" followed by a paragraph about public sector focus. Each column has a corresponding "Our Services >" or "Our Clients >" button.

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About Us Services Clients News Careers Contact Us

Client Login

Alabama
California
Illinois
Kentucky
Missouri
Nebraska
New Mexico
North Carolina
Texas Cost Reporting
Texas ECI
Texas ISD
Texas LHD
Texas MH-IDD

Define the
Develop the s

Uncompromised quality and client service.

Fairbanks provides a depth of industry, programmatic and technology expertise as well as an extensive geographical reach. We are a firm that is dedicated to each client's success, the excellence of our people, and a spirit of partnership. [More about Fairbanks LLC >](#)

What We Do

Fairbanks partners with government agencies to provide strategic, operational, and technology solutions to support Medicaid and other claiming programs.

[Our Services >](#)

Who We Work With

Fairbanks understands and is focused on the public sector. Our major clients include State Medicaid agencies and local government agencies.

[Our Clients >](#)

Moment – Login Screen


The screenshot shows a Microsoft Internet Explorer window titled "Fairbanks LLC MAC Login - Microsoft Internet Explorer". The address bar displays "http://mac.fairbanksllc.com/login/". The page features the Fairbanks LLC logo at the top. Below the logo is a login form with two input fields: "Login:" and "Your Password:". A "Login" button is positioned below the password field. Below the login button, there is a link "Forgot your password? Reset it here:" followed by a "Reset Password" button. At the bottom of the page, a blue footer bar contains the text: "For questions, please contact Fairbanks Client Information Center: (888) 321-1225 or info@fairbanksllc.com" and "© 2007 Fairbanks LLC. All Rights Reserved". The browser's status bar at the bottom shows "Done" and "Internet".

Fairbanks LLC MAC Login - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Refresh Print Mail New Tab

Address <http://mac.fairbanksllc.com/login/> Go Links


FAIRBANKS
LLC

Login:

Your Password:

Login

Forgot your password? Reset it here: [Reset Password](#)

For questions, please contact Fairbanks Client Information Center: (888) 321-1225 or info@fairbanksllc.com
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Done Internet



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Moment – Welcome Screen



Welcome, [redacted] ([Logout](#))

Random Moment Time Study

Welcome to the Random Moment Time Study. Your participation in the random moment Time Study is an integral component for your program to receive Federal reimbursement and should only take a few minutes to complete.

Please complete the following screen indicating the activity that you were performing during your sampled date and time, providing as much detail as possible. If you have any questions, do not hesitate to contact the Fairbanks Client Information Center at (888) 321-1225.

[Start Random Moment Time Study](#)

Your Profile ([Edit](#))

Name: [redacted]
Email: [redacted]
Program: [redacted]
Department
MAC Category: Specialist - Prevention
(Immunization/HIV/STD/TB)

Reference Materials

 [RMTS Information Website \(TX - HHSC\)](#)

Do You Need Help?

For any additional questions, please contact the Fairbanks Client Information Center at (888) 321-1225.

For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanksllc.com

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Moment – Instruction Screen



 **FAIRBANKS** LLC

Welcome, ([Logout](#))

Random Moment Time Study

RMTS Training & Completion Instructions

You have been selected to participate in the Random Moment Time Study (RMTS) on behalf of your center/district. You are required to complete the following RMTS screens, which will ask a series of questions you will need to answer for your sampled moment. It is important that you complete the RMTS screens as accurately as possible.

1. Keep in mind that you are responding for one precise minute in time. Document what you were doing at the sampled moment of time.
2. Dropdowns and/or optional activity descriptions are provided to assist you. If you do not see a response that applies, choose "other" and you will be provided an explanation box in which you can describe what you were doing.
3. If a blue question mark icon appears at the end of an optional activity description, you may click on the "?" to obtain additional information.
4. The person who will be reviewing your response has no idea of your job description, tasks you perform, or why you perform them, so it is up to you to provide the proper information needed to adequately describe what you were doing at the time of your moment. If you provide insufficient information, you will receive a follow-up email or telephone call requesting additional information.
5. Responses such as the following do not provide sufficient information and should be avoided:
 - "I was doing my job."
 - "I was completing my job responsibilities."
 - "I was completing this time study response."
6. It is best to avoid the use of acronyms and to instead spell out the definition, description, or title.
7. Do not provide client/student-specific names. Instead, your response should state that you were working with a client/student or a group of clients/students, if that were the case.
8. If you are traveling at the time of your sampled moment, please include a description of the activity you will be performing upon arrival.
9. If you were not working at the time of your moment, please indicate if it was paid or unpaid leave/time off.

Please click on the button below to continue.

Continue to Random Moment Time Study

Your Profile ([Edit](#))
Name:
Email:
Program:
Department:
MAC Category: Specialist - Prevention
(Immunization/HIV/STD/TB)

Reference Materials
 [RMTS Information Website \(TX - HHSC\)](#)

Do You Need Help?
For any additional questions, please contact the Fairbanks Client Information Center at (888) 321-1225.

For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanksllc.com

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Moment – Questions?

WHO was with you?

WHY were you performing the activity?

WHAT were you doing?



Moment – System Demonstration

Participants' Moment Demonstration

How Sample Participant's respond to their time study moment




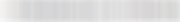
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Response – Question 1


Who was with you?




 FAIRBANKS LLC

Welcome,  ([Logout](#))

Random Moment Time Study

 YOUR TIME STUDY IS NOT COMPLETE.


 Random Moment Time: 06/03/2015, 08:56 AM Central Time

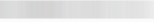
Who was with you during your selected moment?

- ☐ Client
- ☐ Client (Multiple)
- ☐ Medical Provider
- ☐ Administrative Staff
- ☐ Health Department Staff
- ☐ Other Agency Staff
- ☐ Community Contact
- ☐ Contractor / Vendor
- ☐ No one (I was alone)
- ☐ I was not working
- ☐ Other

Next

Your Profile ([Edit](#))


Name: 

Email: 

Program: Edgar County Public Health Department

MAC Category: Physician Assistant (PA)

Reference Materials

 [RMTS Information Website \(TX - HHSC\)](#)

Do You Need Help?

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Response – Question 1

What was with you?

Client

Was the client an:

Existing client

New client

Client (Multiple)

Medical Provider

Administrative Staff

Health Department Staff

Other Agency Staff

Community Contact

Contractor/Vendor

No one/Alone

Not Working

Taking a break

Paid Response – Question 1

Not Paid

Having Lunch

Paid

Not Paid

Paid Time Off

Leave without pay

Other (please specify below)



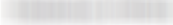
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Response – Question 2


What were you doing?





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Random Moment Time Study



 YOUR TIME STUDY IS NOT COMPLETE.


 Random Moment Time: 06/03/2015, 08:56 AM Central Time

Previous Answer:
 IF YOU WERE WORKING WITH A CLIENT, WAS THAT PERSON
[EDIT AN EXISTING CLIENT](#)

What were you doing during your selected moment?

Next

Your Profile ([Edit](#))
Name: 
Email: 
Program: Edgar County Public Health
Department
MAC Category: Physician Assistant (PA)

Reference Materials
 [RMTS Information Website \(TX - HHSC\)](#)

Do You Need Help?
For any additional questions, please contact the
Fairbanks Client Information Center at
(888) 321-1225.

For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanksllc.com

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Response – Question 2


What were you doing? (Text Box)


Typically 2-4 sentences that provides specific information about what you were doing at that minute.

- Please keep in mind that the person coding the moment has no idea of the participant's job description; tasks performed or why they are performed
- It is up to the participant to provide the information needed for those independent coders to code the response accurately
- Please don't use acronyms in the description
- Please don't use people's names in the responses
- If not working, indicate if it was paid or unpaid leave

Response – Question 3


Why were you performing this activity?

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Random Moment Time Study

✖ YOUR TIME STUDY IS NOT COMPLETE.

 Random Moment Time: 06/03/2015, 08:56 AM Central Time

Previous Answer:

 WHAT WERE YOU DOING DURING YOUR SELECTED MOMENT?
[EDIT](#) DFGD

Why were you performing this activity?

☐ Determine the client's eligibility

☐ Program Planning, Development and Interagency Coordination

☐ Tell people about a service

☐ Help a person obtain a needed service

☐ Monitor the provision of a service

☐ Refer the person to a needed service

☐ Provide a direct medical service

☐ Coordinate services for someone

☐ Coordinate or provide transportation

☐ Coordinate or provide translation

☐ Arranging or attending a meeting

☐ Secure and/or maintain eligible Medicaid providers

☐ Provide or attend staff training

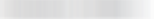
☐ Provide or receive supervision


☐ Not Working

☐ Other

Next

Your Profile ([Edit](#))


Name: 

Email: 

Program: Edgar County Public Health Department

MAC Category: Physician Assistant (PA)

Reference Materials

 [RMTS Information Website \(TX - HHSC\)](#)

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Response – Question 3

Why were you performing this activity?

Determine the clients eligibility

Tell people about a service

Help a person obtain a needed service

Monitor the provision of a service

Refer the person to a needed service

Provide a direct medical service

Coordinate services for someone

Coordinate or provide transportation to a:

Medical service

Non-Medical service

Other (please describe)

Identify the service



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Services

Response – Question 3

Why were you performing this activity?

Coordinate or provide translation for or during a:

Medical service

Non-Medical service

Other (please describe)

Secure and/or maintain eligible Medicaid providers

Program Planning, Development & Interagency Coordination

Provide or attend staff training

Medical training

Non-Medical training

Other (please specify)

Provide or receive supervision

General supervision

Utilization Review

QA/Administrative Policies and Procedures



Response – Question 3

Why were you performing this activity?

Not Working

Other



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Response – Additional Question 3

Please identify the service?



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Random Moment Time Study

YOUR TIME STUDY IS NOT COMPLETE.

Random Moment Time: 06/03/2015, 08:56 AM Central Time

Previous Answer:

✓ WHY WERE YOU PERFORMING THIS ACTIVITY?
[EDIT](#) REFER THE PERSON TO A NEEDED SERVICE

If you were referring the person to a needed service, can you identify what service you were referring to?

Service

Next

Your Profile ([Edit](#))
Name:
Email:
Program: Edgar County Public Health Department
MAC Category: Physician Assistant (PA)

Reference Materials
[RMTS Information Website \(TX - HHSC\)](#)

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Complete Time Study

Review Responses and Submit

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Random Moment Time Study

 YOUR TIME STUDY IS NOT COMPLETE.

 Random Moment Time: 06/03/2015, 08:56 AM Central Time

You have completed the Random Moment Time Study. Please take a moment to review your answers, and make any corrections. When you are ready, please hit the "Certify & Submit" button to finalize your survey responses.

Who was with you during your selected moment?
[Edit](#) Client

If you were working with a client, was that person
[Edit](#) An existing client

What were you doing during your selected moment?
[Edit](#) 

Why were you performing this activity?
[Edit](#) Coordinate services for someone

If you were coordinating the provision of services, can you identify what services you were coordinating?
[Edit](#) 

Could only someone with specialized medical knowledge and training perform this activity?
[Edit](#) Yes

Can you please describe how you used your medical knowledge and training to perform this activity?
[Edit](#) Yes

Certify & Submit

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Your Profile ([Edit](#))
Name: 
Email: 
Program: Edgar County Public Health
Department
MAC Category: Physician Assistant (PA)

Reference Materials
 [RMTS Information Website \(TX - HHSC\)](#)

Do You Need Help?
For any additional questions, please contact the Fairbanks Client Information Center at (888) 321-1225.




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Complete Time Study

Printed Completed RMTS





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Welcome,  ([Logout](#))


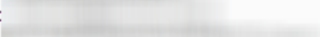

Random Moment Time Study


 **CONGRATULATIONS LAUREN OLVERA, YOU HAVE COMPLETED THE TIME STUDY!**

 **Random Moment Time:** 08/02/2013, 02:33 PM Central Time

Thank you for participating in the MAC time study! You have now completed the necessary steps required for participation. We appreciate your participation in this important program. You may now logout or close this window.

 [Confirmation Receipt](#)

Your Profile
Name: 
Email: 
Program: 
(MHMR)
MAC Category: Direct Care Personnel

Reference Materials
 [RMTS Information Website \(TX - HHSC\)](#)


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For questions, please contact Fairbanks LLC Client Information Center: (888) 321-1225 or info@fairbanksllc.com

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Complete Time Study


Printed Confirmation Receipt

 **FAIRBANKS** LLC

Welcome, ([Logout](#))

Random Moment Time Study

 , YOUR MAC TIME STUDY IS COMPLETE AND WAS CERTIFIED BY FAIRBANKS AT
06/10/2015, 09:42 AM CENTRAL TIME.

 **Random Moment Time:** 06/03/2015, 08:56 AM Central Time

Here are your answers:

Who was with you during your selected moment?
Client

If you were working with a client, was that person
An existing client

What were you doing during your selected moment?

Why were you performing this activity?
Coordinate services for someone

If you were coordinating the provision of services, can you identify what services you were coordinating?

Could only someone with specialized medical knowledge and training perform this activity?
Yes

Can you please describe how you used your medical knowledge and training to perform this activity?
Yes


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Your Profile

Name:
Email:
Program: Edgar County Public Health
Department
MAC Category: Physician Assistant (PA)

Reference Materials

 [RMTS Information Website \(TX - HHSC\)](#)

Do You Need Help?

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Email Messages

- Types of Communication managed predominantly via e-mail, i.e.:
 - RMTS moment notifications and follow ups
 - Participant list updates
 - Compliance follow-ups
 - MAC Financial notifications and follow-ups
- Role in Fairbanks dictates what messages you receive
- It's critical that your LHD authorize your e-mail system to accept emails from Fairbanks.
- Confirm with your IT staff to make sure that e-mails with info@fairbanksllc.com, and @hhsc.state.tx.us extensions pass through firewalls and spam filters.



Helpful Hints

Passwords

Passwords will not change

If you forget your password, you can reset it at the log-in screen

Manage Contacts

Delete contacts if they are no longer with your entity

Do not back space and type over the name

To add a contact in system use the “Add a new contact”

Username & Password will be e-mailed

The primary contact can change primary status from themselves to a secondary. A secondary contact cannot change primary contact status

There can be only one Primary contact for each role (RMTS and MAC Financial)

There is no limit to the number of secondary contacts

For system questions contact Fairbanks support line: (888) 321-1225



WRAP UP

- If you are not listed in the Fairbanks system as a Contact then you cannot receive credit for completing this training until you have been added by the Primary RMTS contact or Director

There are NO certificates for training:

- You will receive an email thanking you for attending today's training, however this does not mean that you will receive training credit.
- RMTS Contacts can view attendance information via Fairbanks by clicking the "Training" tab on the top far right portion of the screen
- A maximum of 9 days processing time is required after attending training before the session attended will be listed next to the RMTS Contact's name and the "status" column will then show full access
- Once "Full Access" is indicated you will be able to update/certify the participant list
- You can print this screen using the printer icon located on the top right corner of the screen for your records



Contact Information

Time Study

- Scott Kruse - Director (512) 490-3194
- Ri-Chard Thomas – Team Lead
- Alexandra Young – Rate Analyst

E-Mail Address

TimeStudy@hhsc.state.tx.us

Website

<https://rad.hhs.texas.gov/time-study/time-study-lhd-training-information>

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info@fairbanksllc.com

(888) 321-1225





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Thank you

Time Study Unit